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APPLICANTS

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** CONTINUING DATA ***** *Eoe*

** FOREIGN APPLICATIONS ***** *Eoe*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 02/17/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Eoe</i> Examiner's Signature Initials	STATE OR COUNTRY SWEDEN	SHEETS DRAWING 32	TOTAL CLAIMS 49	INDEPENDENT CLAIMS 2
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 23117
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TITLE
 Multi-dimensional joint searcher and channel estimators

FILING FEE RECEIVED 1422	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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